

## PART B - ISSUE FEE TRANS

**STRUCTIONS:** This form should be completed when transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. Correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee. Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "ESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
LAURA TERLIZZI SKJERVEN, MORRILL, MACPHERSON, FRANKLIN & FRIEL 25 METRO DRIVE, SUITE 700 SAN JOSE, CA 95110		INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		CO-INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
<input type="checkbox"/> Check if additional changes are on reverse side			

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED		
07/949,657	09/23/92	1036	STISSON, R	1807 05/28/96		
First Named Applicant: SIMONS, MALCOLM						
TITLE OF INVENTION: INTRON SEQUENCE ANALYSIS METHOD FOR DETECTION OF ADJACENT AND REMOTE LOCUS ALLELES AS HAPLOTYPES						
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 M-1647-AC-US	435-006.000	0113	UTILITY	YES	\$625.00	05/28/96

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	Skjerven, Morrill, MacPherson, Franklin & Friel
	2 Laura Terlizzi

DO NOT USE THIS SPACE	
820 TD 19-2384 06/07/94 07940452	
82222-242 625.00CH	
82223-561 33.00CH	

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	
(1) NAME OF ASSIGNEE: GeneType A.G.	
(2) ADDRESS: (CITY & STATE OR COUNTRY) Zug, Switzerland	
(a) <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS. PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.	

(a) The following fees are enclosed:  Issue Fee  Advance Order - # of Copies

(b) The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 19-2386

(ENCLOSE PART C)  Issue Fee  Advance Order - # of Copies **eleven (11)**

Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) **Reg. No. 31,307** (Date)

**Laura Terlizzi** May 28, 19

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party

In interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE